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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		Attorney Docket Number	
		First Named Inventor	Aaron Stephen Meyers
<b>COMPLETE IF KNOWN</b>			
Application Number			
Filing Date			
Art Unit			
Examiner Name			

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND SYSTEM FOR BUILDING A REPORT FOR EXECUTION AGAINST A  
DATA STORE**

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY)   as United States Application Number or PCT International
Application Number   and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number  OR  Correspondence address below  
 or Bar Code Label

Harrison Colter

## Name

333 South 520 West  
Suite 310

## Address

Lindon  
CityUtah  
State84042  
ZIPUSA  
Country(801) 932-6162  
Telephone(801) 932-6161  
Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor

Given Name Aaron Stephen  
(first and middle [if any])

Meyers  
Family Name  
or SurnameInventor's  
Signature*Aaron S. Meyers*07/25/2003  
DateProvo  
Residence: CityUtah  
StateUSA  
CountryUS  
Citizenship

2018 West 1600 North

## Mailing Address

Provo  
CityUtah  
State84604  
ZIPUSA  
Country

NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor

Given Name Robert Alan  
(first and middle [if any])

Meyers  
Family Name  
or SurnameInventor's  
Signature*Robert A. Meyers*07/25/2003  
DateOrem  
Residence: CityUtah  
StateUSA  
CountryUS  
Citizenship

1762 South 100 East

## Mailing Address

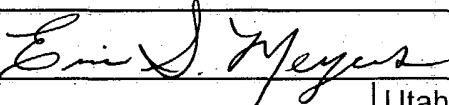
Orem  
CityUT  
State84058  
ZIPUSA  
Country

Additional inventors are being named on the  supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Eric Stephen Given Name		Meyers Family Name or Surname	
Inventor's Signature			07/25/2003 Date
Provo Residence: City	Utah State	USA Country	US Citizenship
2018 West 1600 North Mailing Address			
Mailing Address			
Provo City	Utah State	84604 ZIP	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	7/25/2003
First Named Inventor	Aaron Stephen Meyers
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

Practitioners at Customer Number:

OR

Practitioner(s) named below:

Name	Registration Number
Harrison Colter	31341

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

<input checked="" type="checkbox"/>	Firm or Individual Name	Colter Jennings			
Address		333 South 520 West			
Address		Suite 320			
City	Lindon	State	Utah	Zip	84042
Country	USA				
Telephone	(801) 932-6162	Fax	(801) 932-6161		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Aaron Stephen Meyers		
Signature	<i>Aaron S. Meyers</i>		
Date	7/25/2003	Telephone	(801) 377-8582

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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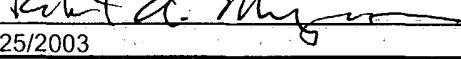
<input checked="" type="checkbox"/>	Firm or Individual Name	Colter Jennings			
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**SIGNATURE of Applicant or Assignee of Record**

Name	Robert Alan Meyers		
Signature			
Date	7/25/2003	Telephone	(801) 762-0295

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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Name	Registration Number
Harrison Colter	31341

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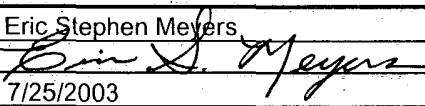
 The address associated with Customer Number: 

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Colter Jennings			
Address	333 South 520 West			
Address	Suite 320			
City	Lindon	State	Utah	Zip 84042
Country	USA			
Telephone	(801) 932-6162	Fax	(801) 932-6161	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Eric Stephen Meyers		
Signature			
Date	7/25/2003	Telephone	(801) 377-8582

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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